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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known			<u>n</u>			
FEE TRANSMITTAL				Application Number		10/660,902				
			Filing Date		September 12, 2003					
For FY 2006		First Named Inventor		Xing SU						
				Examiner Name A. M. Bertagna						
Applicant claims smal	Art Unit		1637							
TOTAL AMOUNT OF PAY	Attorney Docket No. 070702008020									
METHOD OF PAYMEN	T (check all t	that apply)								
Check Credit C	Check Credit Card Money Order None Other (please identify):									
X Deposit Account Depo	osit Account Num!	ber: 03-1952 D	eposit Acco	ount Name:	М	orrison & Foers	ter LLP			
For the above-ident	tified deposit	account, the Di	rector is	hereby authorize	ed to: (ch	eck all that apply)				
x Charge fee(s)						ndicated below, e	xcept for the	filing fee		
Charge any a fee(s) under	dditional fee(	s) or underpayr and 1.17	ment of	x Credit	any over	payments				
FEE CALCULATION (A	All the fees	below are du	ie upor	filing or may	be sub	ject to a surcha	arge.)			
1. BASIC FILING, SEARCH	H, AND EXAM	VINATION FEE	S			,				
	FILIN	IG FEES	SEA	RCH FEES	EXAM	INATION FEES				
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity ) Fee (\$)	Fees Pa	aid (\$)		
Utility	300	150	500	250	200	100	***			
Design	200	100	100	50	130	65	· · · · · · · · · · · · · · · · · · ·			
Plant	200	100	300	150	160	80				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0				
2. EXCESS CLAIM FEES							<u> </u>	mall Entity		
Fee Description							Fee (\$)	Fee (\$)		
Each claim over 20 (includ	-				•		50	25		
Each independent claim ov	*	ng Reissues)					200	100		
Multiple dependent claims							360	180		
		Fee (\$)	Fee P	aid (\$)	-	Multiple Depende				
- =  HP = highest number of total cla		= reater than 20.				Fee (\$)	Fee Paid (\$)	_		
Indep. Claims Extra	Claims F	Fee (\$)	Fee P	aid (\$)						
= HP = highest number of indeper	ndent claims paid	d for, if greater than	1 3.							
3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
<u>Total Sheets</u> <u>E</u> - 100 =	xtra Sheets	Number o		dditional 50 or frac			<u>Fee P</u>	aid (\$)		
				, up 10 a mile						

Total Sheets	Extra Sheets	<u>N</u>	umber of each additional 50 or fraction thereof	Fee (\$)		Fee Paid (\$)		
100	) =	/50	(round up to a whole number) x		= _			
4. OTHER FEE(S)						Fees Paid (\$)		
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late fil		790.00						

SUBMITTED BY	1/	7	-	,				
Signature	//		11		Registration No. (Attorney/Agent)	42,465	Telephone	(703) 760-7755
Name (Print/Type)	Raj S. Dave	70	$V_{I}$				Date	January 4, 2007